

STATE PLAN UNDER TITLE XIX
OF THE SOCIAL SECURITY
MEDICAL ASSISTANCE PROGRAM

Attachment 1.2 B
PAGE 7

STATE: COMMONWEALTH OF PUERTO RICO

3. Financial Management Division

Responsible for the operation and establishment of the cash management system and the capitation plan to distribute federal Title XIX funds.

Reviews and approves provider cost reports and prepares and submits federal reimbursement and budget reports.

Studies Reports and Economic Analysis Section

Responsible for the analysis and evaluation of providers cost reporting system and in the production of Program periodic and annual reports.

3.1 Statistics Division

Responsible for the gathering, analysis, and reporting of all statistical data necessary for the administration of the Programs and for providing other required reports.

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STATE PLAN UNDER TITLE XIX
OF THE SOCIAL SECURITY
MEDICAL ASSISTANCE PROGRAM

ATTACHMENT 1.2- B
Page ~~7~~ 8

STATE: COMMONWEALTH OF PUERTO RICO

- FRAUD and Abuse Unit - Medicaid Program contracted the Department of Justice's Fraud Unit to investigate, determine and process fraud situations of providers, employees or eligibles.

Hearings Boards - Processes claims and appeals received from applicants, beneficiaries and providers and submits necessary reports to the Medicaid Program Director.

5. Administration Division

Organizes and supervises the administrative aspects of the OAMI. Coordinates changes and improvements to provide necessary services. This division has six sections:

a. Personnel Section - Responsible of the coordination and supervision of the administrative procedures related with the human resources and personnel functions of the Program.

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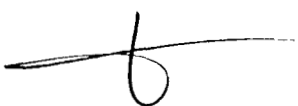
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OFFICIAL

STATE PLAN UNDER TITLE XIX
OF THE SOCIAL SECURITY
MEDICAL ASSISTANCE PROGRAM

ATTACHMENT 1.2- B
Page ~~10~~ 9

STATE: COMMONWEALTH OF PUERTO RICO

- b. Administrative Budget Section - Designs the internal and external work plan for the OAMI including the plan for evaluation on program operations, investigations and necessary studies for the establishment and revision of policies concerning the administration of the Program.
- c. Purchases Section - Responsible for the adquisition of general supplies and the equipment needed by the OAMI. Coordinates and supervises the supply of the equipment and the materials requested.
-  d. Maintenance Section - Responsible for building maintenance.
- e. Inventory and Warehouse Section - Keeps complete stock and control of required materials in accordance with the Department of Health rules and regulations.
- f. Transportation Section - Responsible for providing transportation services and upkeeping the official vehicles.

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OFFICIAL

STATE PLAN UNDER TITLE XIX
OF THE SOCIAL SECURITY
MEDICAL ASSISTANCE PROGRAM

ATTACHMENT 1.2- B
Page ~~11~~ 10

STATE: COMMONWEALTH OF PUERTO RICO

6. Quality Control Division

Quality Control is a systematic and coordinated effort by State and Federal Government to assure proper and efficient administration of Medicaid. The primary purpose of the System is to supply State and Federal administration with information concerning correctness of eligibility determinations and payments amounts. The Quality Control System is designed to measure error rate levels and to provide information on the nature and causes of errors so that corrective actions may be undertaken.

The objectives of the Medicaid Eligibility Q.C. System are accomplished by means of a continuous review of recipients identified through statistically reliable samples. State Q.C., reviewers make full investigation, carry out face to face interviews make full investigation, carry out face to face interviews with the recipients involved and verify and document each element of eligibility.

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OFFICIAL

STATE PLAN UNDER TITLE XIX
OF THE SOCIAL SECURITY
MEDICAL ASSISTANCE PROGRAM

ATTACHMENT 1.2- B
Page ~~12~~ 11

STATE: COMMONWEALTH OF PUERTO RICO

The Division of Quality Control is centralized. The development of this activity on the regional level is performed by social service technicians (Q.C. reviewers) supervised by the Central level.

- Director

The Director of the System performs his job under general guidance and direction of the Director of the Medicaid Program. Is responsible for the direction of the Quality Control System, providing constant supervision of personnel and to all activities within the System; planning and establishing the scope and priorities of these. Maintains close coordination with the Agency's statistical staff, other administrative and normative staff within Program and other State Agencies. Assures to maintain the Program informed about the review findings and cases in error so that corrective action may be undertaken.

- Maintains an adequate staffed organization in order to keep all the required activities current and at a maximum quality level.

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OFFICIAL

STATE PLAN UNDER TITLE XIX
OF THE SOCIAL SECURITY
MEDICAL ASSISTANCE PROGRAM

ATTACHMENT 1.2- B
Page ~~13~~ 12

STATE: COMMONWEALTH OF PUERTO RICO

- 1
- Quality Control Reviewers goes over the cases included in the monthly samples. The work of these reviewers consists in the revision of the eligibility determination of the sample cases certified eligible by the Medicaid Program. They will cover the revision of sample cases certified
 - eligible as well as negative cases. Included also is a review of Ineligile AFDS and AABD cases receiving cash assistance to determine eligiblity for Medicaid. As part of their duties, they will determine and identify the existence of Third Party Liability resources, and will perform the Claims Processing Q.C. Review.
 - The Quality Control reviewers are located in accordance to the Program's regional offices.
 - Central Office Quality Control staff keeps track of all completed sample cases of recipients certified eligible by Medicaid Program, and all Q.C. AFDC and AABD cases and edit the eligible sample cases,

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OFFICIAL

STATE PLAN UNDER TITLE XIX
OF THE SOCIAL SECURITY
MEDICAL ASSISTANCE PROGRAM

ATTACHMENT 1.2- B
Page ~~14~~ 13

STATE: COMMONWEALTH OF PUERTO RICO

performs the TPL review and the computations of misspent dollars of all cases in error including the AFDC and AABD cases. Desk reviews for all ineligible cases of this sample, are conducted for assignment to the regional reviewers for field investigation.

Quality Control Program Division will coordinate effectively with Fraud and Abuse Unit in order to adequately refer those situations that through their field investigations and/or desk reviews a possible fraud situation is suspected.

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OVERALL INTERACTION OF THE
FUNCTIONS AND ORGANIZATION OF THE MEDICAL ASSISTANCE PROGRAM

As an answer to existing agreements among the Federal Government and the Commonwealth of Puerto Rico it is deemed necessary, as part of the Medical Assistance State Plan, to present the various internal and external relationships of the Department in accordance with such agreements. Diagram III illustrates such relationships with the Social Services Department; Auxiliary Secretaryship of Ambulatory Services (Family and Health Planning) and other Auxiliary Secretaryships; the Office of the Director of Certification and Licenses; the Information System Office as well as the Office of Health Economy. Besides, the diagram shows at the level of the Health Secretary the two Advisory Committees, one for the Medical Assistance and another specifically EPSDT.

Through this organization the responsibilities of the Health Department, as the single State Agency are delineated.

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